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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/062,257

02/01/2002

Kyogo Itoh

3190-014

8619

33432 7590 03/06/2008

KILYK & BOWERSOX, P.L.L.C.

400 HOLIDAY COURT

SUITE 102

WARRENTON, VA 20186

EXAMINER

DIBRINO, MARIANNE NMN

ART UNIT

PAPER NUMBER

1644

MAIL DATE

DELIVERY MODE

03/06/2008

PAPER

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	10/062,257	ITOH, KYOGO	
	<b>Examiner</b>	<b>Art Unit</b>	
	MARIANNE DIBRINO	1644	

All participants (applicant, applicant's representative, PTO personnel):

(1) MARIANNE DIBRINO. (3)\_\_\_\_\_.

(2) NAHEID USMAN. (4)\_\_\_\_\_.

Date of Interview: 26 February 2008.

Type: a) ☒ Telephonic b) ☐ Video Conference  
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.  
If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: \_\_\_\_\_.

Identification of prior art discussed: \_\_\_\_\_.

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: We discussed claim amendmentst to potentially overcome the rejections of record.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

/GRE/

Primary Examiner, Art Unit 1644

Examiner Note: You must sign this form unless it is an  
Attachment to a signed Office action.

\_\_\_\_\_  
Examiner's signature, if required